

1823

An

Inaugural Dissertation

on

Acute Dysentery

by

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Thompson's

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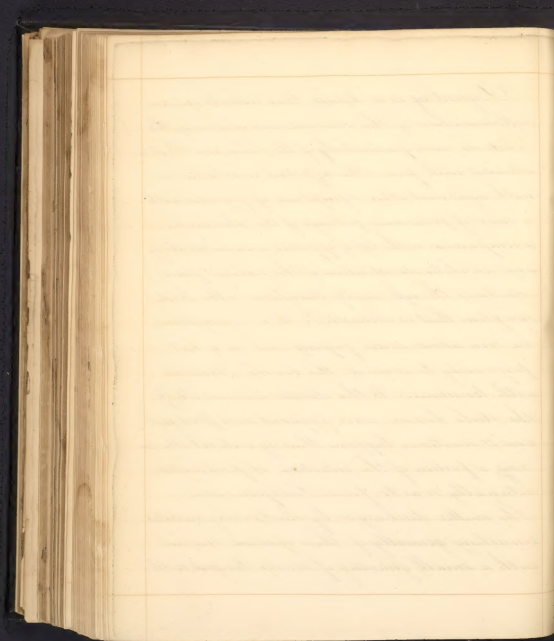
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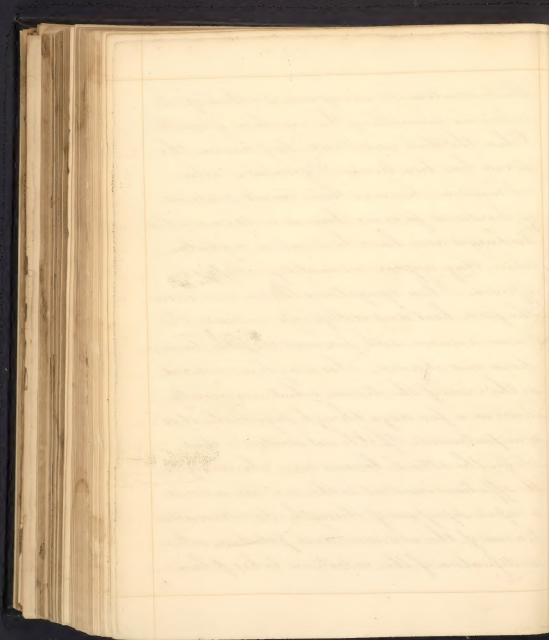
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Dysentery is a disease, that consists in an inflammation of the mucous membrane of the intestines, and particularly of the colon and Rectum attended with fever. This affliction is ushered in with rigors and other symptoms of pyrexia, with a sense of pain and fullness of the abdomen, accompanied with loss of appetite, nausea, vomiting, and an obstinate retention of the natural feces, sometimes, though rarely, diarrhoea is the first symptom that is observed. To these symptoms, are soon added severe griping and a great propensity to evacuate the bowels, attended with tenesmus. As the disease extends itself, the stools become more frequent and painful, and it sometimes happens, that by violent straining a portion of the intestine is protruded externally, so as to form Prolapsus ani. The matter discharged by stool, is very various consisting generally of thin mucus, mixed with a small quantity of serum tinged with

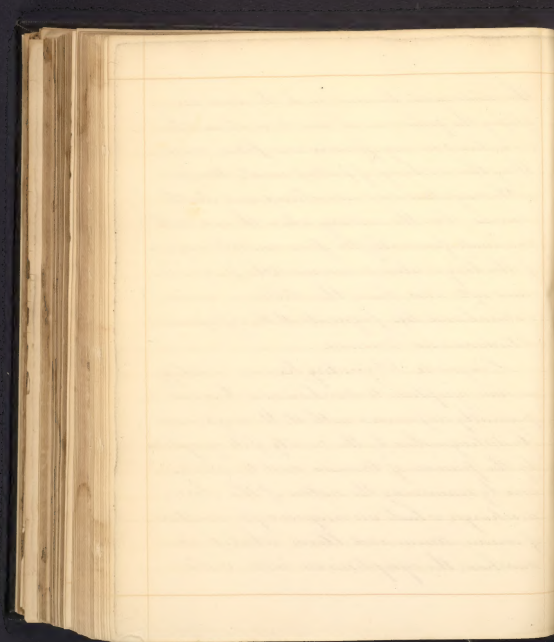


blood; sometimes it is compound of a thick opaque substance resembling the coagulum of milk. When the stools consist entirely of mucus, the disease has been termed *Dysenteria alba*, vel *mucosa*. Now and then, small portions of hardened faeces are observed in these morbid discharges, and have been called *scybala*, when they appear, momentary relief is afforded. These symptoms become more severe; the fever, heat and restlessness increase, the tongue is covered with fur, and the pulse becomes hard and chorded. This may be considered as the crisis of the disease, which commonly occurs in a few days, though frequently, it is more protracted. If it be not arrested in this stage, the attack becomes more alarming. To the affections incident to the case, are added, a rapid depression of strength, cold extremities, tension of the abdomen, and petechiae, when mortification of the intestine takes place



the countenance becomes sunk, the eyes are glassy, the pulse is weak and tumultuous, the evacuations are very offensive and fætid, resembling the washings of putrid meat, attended with singultus and convulsions, and death ensues. On the contrary, when the case will terminate favourably, the fever remits, the surface of the body is relaxed and moist, the pulse becomes softer and slower, the stools are more natural and less frequent, with the disappearance of tormina and tenesmus.

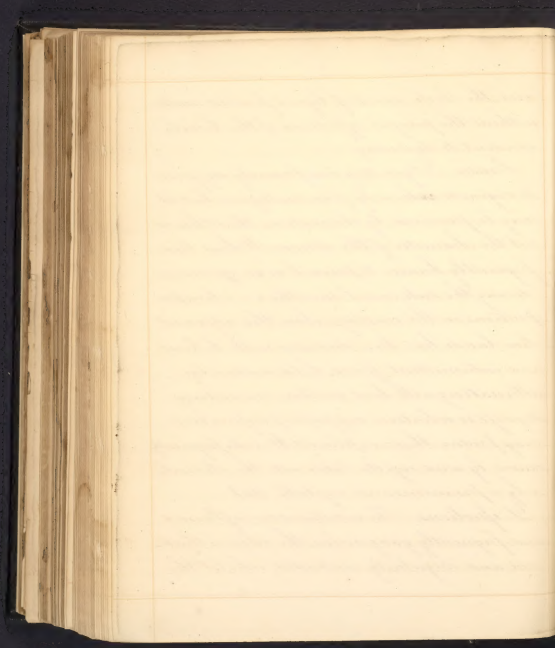
Diagnosis. Dysentery bears an analogy in some symptoms to diarrhoea, and has been frequently confounded with it. It may however be distinguished by the severity of its symptoms, by the presence of tormina and tenesmus, and by examining the nature of the alvine discharges, which are composed of a mixture of mucus, serum and blood; whilst in diarrhoea, the symptoms are more mild.



and the stools consist of liquid feculent matter without the painful affections of the bowels incident to dysentery.

Causes. Dysentery was formerly supposed to originate exclusively from contagion; but it may be perceived by observation, that this is not the character of the disease. It has been frequently known to prevail as an epidemic during the autumnal months in elevated positions, in the country, when the adjacent low lands have been desolated with bilious and intermittent fevers. Cold suddenly alternating with heat, moisture succeeding dryness, or whatever suppresses perspiration, may produce this complaint. It is also frequently caused by acid ingesta taken into the stomach, or by a penurious and vegetable diet.

Dispositions. The intestines are inflamed and frequently gangrenous, the colon is thickened and irregularly contracted, whilst the



mucus membrane is abundant over the
mucous glands of the great oesophagus.
Depending on the inflammation, however,
the disease is oblique in consequence of the
location and extension of the area and is
inflammatory rather than dysenteric.
I shall not dwell on the
dysentery in this case, which is the most pre-
valent form of the disease in this country.
The indications in regard to antiseptic
stimulation to correct the spasmodic
contraction of the alimentary canal, thereby
to procure natural evacuation and relieve
the distressing condition of the bowels.

It is necessary to procure the evacuation
by the use of the laxative in these cases, but the
patient complains of constant uneasiness
with pain in the abdomen, and is plagued with
fever and constipation. I of course bleed
until I see after about the progress of the attack
and remove the system susceptible to it.



active, & the venous, & especially a great
of the Venous takes place, & causing great pain
and obstructing the venous discharges. It is
remission is imperiously demanded, and
presents great pain in removing the spasmodic
constriction, and relaxing the surface of the
skin. Should a recurrence of the infla-
mmatory symptoms take place, the blood
may need to be repelled either from the arm,
a leech by cups or leeches applied to the
abdomen, until the inflammatory symp-
toms are removed.

It is the practice of many physicians,
influenced by the great name and authority
of Sydenham, to commence the treatment
with an emetic. This is generally unnecessary
except in those cases where there is great oppres-
sion and nausea with a sense of weight at
the stomach, indicating the presence of acid
and even matter, and where the disease appears



in miasmatic countries and is ajacisive with
intermittent fever.

After having viewed the inflammatory symptoms
by general and typical bloodletting, we must
resort to the use of cathartic remedies, which are
absolutely necessary to remove congestion, and to
renew the vitiated secretions of the intestinal
canal. The castor oil is most commonly employed,
and is better calculated to afford relief in violent
cases of the disease than any other laxative; its
action is mild and generally effectual. But in
dysentery, this medicine, passes very rapidly through
the bowels and may be observed in its original form
on the surface of the olive evacuations; it
must therefore be given in large doses and
frequently repeated, so that several ounces may
be taken during the 24 hours.

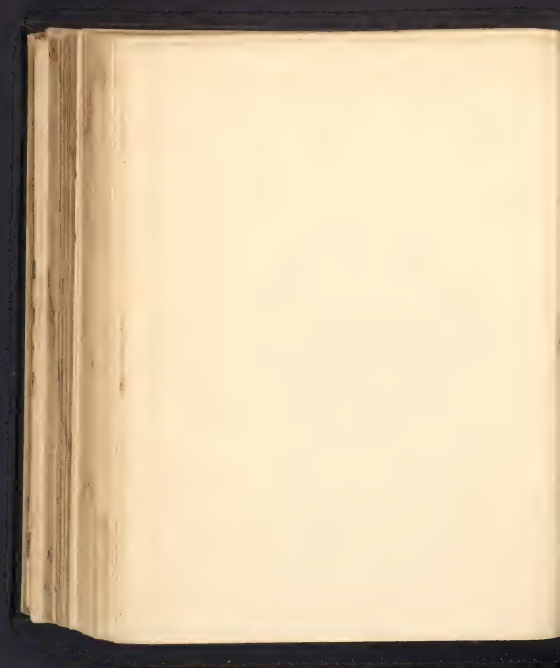
In dysentery when the liver is affected, or
when the symptoms are very violent, Calomel
is undoubtedly superior, either alone, or in



combination with rhubarb, if it tinges in
the bowels its action should be promoted by
the administration of a mild laxative as the
Opium salve or by the use of enjections.

Clyburn in his Observations on the Diseases
of Minnesota, mentions that he succeeded in
many cases where other cathartics had failed
in relieving the intestines, by giving calomel
in combination with opium, in the proportion
of six or eight grains of the former to one grain
of the latter at night, followed by the use of
a laxative the ensuing day. By this remedy
stools consisting of hard round and flat
masses were discharged giving great relief to
the patient.

Having by these means reduced the inflam-
mation of the intestinal canal, and removed
their vitiated contents, we must endeavor to
induce diaphoresis and to restore the natural
condition of the skin. The medicines that



produce this effect, are considered by some physicians
and particularly by *Moreau*, to possess almost an
exclusive power in curing this painful complaint.
His treatment consisted of an emetic in the com-
mencement of an attack with a view of evacuating
the stomach, and of forwarding the blood to
the superficies of the body, so as to induce a
tendency to diaphoresis. After the operation of
the emetic he prescribed small doses of the
salt of tartar, or of Tamaris powder to excite
perspiration; during the action of these remedies
the patient must be confined to bed, and sup-
plied with warm relaxing drinks. In this
manner, he states that he has frequently
removed the disease.

As much better perspiration than those recom-
mended by *Moreau*, to excite a moderate action
of the capillary vessels of the skin, is a com-
bination of calomel, ipecacuanha and opium,
that is to be given every three or four hours.



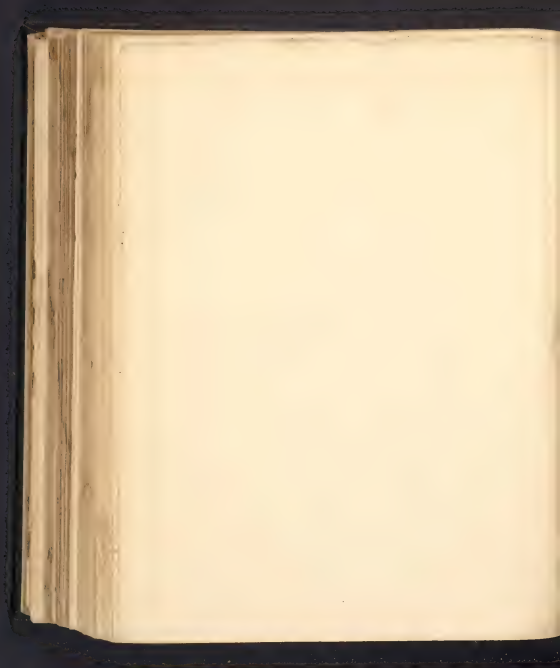
Strongly but slowly, the medicine
and accurate prescription with the other
physicians at the time, is the form
of opium, and I have frequent opportunities
of witnessing its beneficial effects. It is gene-
rally given in the following proportions

R. Calomel gr

Butir. opii gr

Spissuano gr ^{ss}

It soothes intestinal irritation, relaxes the
muscle of the bowels and gently opens the
bowels. But in those cases, where we require
a copious purgation, we must resort to the
Cathartic powder, which should be given in
the use of ten grains, except there is fever
burns, the continuance of a few drops of it
generally relieves the pain, diminishes the
frequency of the pulse, and contributes in
a great degree to the removal of the disease.
It after copious evacuation and purging



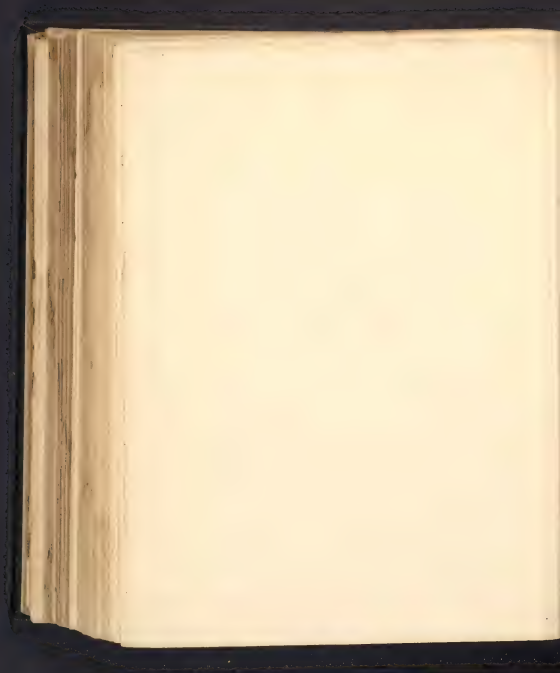
in proof the reality of the symptoms is not
diminished and that the pain is often con-
tinuous without abatement, we must make
use of the stimulatory applications, which
should never be forgotten in severe cases
of intestinal disease. If they are applied
either to the seat of the disease, or to the circum-
stances, much more advantage is to be derived,
when they are placed on the abdomen, and
they should never be applied directly, as
the patient fears to the application of them
to the stomach.

Mercury is a valuable and important
remedy in dysentery, and especially in
those cases where the hepatic system is
involved. By the practitioners in the East
and West Indies, it is given in large doses
internally combined with some digesti-
ble, as opium, or in the antimonial
preparations, and in the use of frictions



of mercurial treatment frequently repeated during the day, with a view to establish phlogism. As soon as the mouth becomes affected, the symptoms are ameliorated, the irritation of the intestines subsides and the regular action of the bowels is established. It is not necessary to urge the cabinet to this point in this country, where the disease is more insidious and generally runs its course, before salivation could be induced.

If the progress of the disease is not arrested by the preceding remedies, the striking stage appears, and is characterised by great danger. When the treatment must be varied, we must resort to stimulants, the best of which are small doses of opium or the volatile alkali which is given either in substance, or in the form of a julep, its operation should be assisted by the use of



simulation. Within a few years the spirits
of opium have been used with much ad-
vantage in this stage of the complaint. It is
given in the dose of one or two drams every
two or three hours, according to the urgency
of the case.

There are some local affections attendants
of dysentery, that are very painful and
distressing to the patient. The most severe
are tenesmus and tenosmus. They exist during
the whole course of the disease, but generally
are more severe towards its termination.

A variety of remedies have been suggested
to remove these affections in the composition
of which opium is the chief constituent.

When tenosmus is produced by collections
of acid matter, or of hardened feces in
the bowels, the best medicine to remove
them, is the diagenous mixture, which
remains better on the stomach, than pure



oil. An anodyne injection is frequently
production of great benefit. It consists of
a dram of laudanum added to two or
three ounces of barley water. If the rectum
is very irritable and will not retain the
injection, we may substitute an opium
pill of five or six grains as a suppository,
which will cause no irritation and fre-
quently relieves these symptoms. An
injection of melted butter, free from salt and
rancidity is also very efficacious in allaying
the irritation, and tenesmus of the intestine.

It is necessary to pay great attention
to the diet of the patient in dysentery, as
this is a disease of inflammatory action, the diet
should consist of the mildest articles and par-
ticularly of fluids, as barley water, rice water
and the diluted preparations of sago,
tapioca or arrow root. In the latter stages
where great debility exists, a small portion

of wine, added to these farinaceous articles frequently proves of much service, by restoring the exhausted strength of the patient. When he commences to take nourishment in a solid form, it should be of the most digestible nature, and must be taken in small quantities frequently repeated. He should always wear flannel next to the skin, and be warmly clothed, taking care to avoid exposure to cold, as a predisposition remains for a long time in the system, towards a relapse of the disease.

